

10/585400

AP20 Rec'd PCT/PTO 07 JUL 2006

Application Data Sheet

Application Information

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	A RING FOR HOLDING A LENS FOR DIP TREATMENT THEREOF
Attorney Docket Number::	0604-1014
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	2
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: PIERRE
Middle Name::
Family Name:: CARON
Name Suffix::
City of Residence:: CHARENTON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: ESSILOR INTERNATIONAL 147 RUE DE PARIS
City of Mailing Address:: CHARENTON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94227

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ANNETTE
Middle Name::
Family Name:: CRETIER
Name Suffix::
City of Residence:: CHARENTON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: ESSILOR INTERNATIONAL 147 RUE DE PARIS
City of Mailing Address:: CHARENTON

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94227

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ANNICK
Middle Name::
Family Name:: GASCONS
Name Suffix::
City of Residence:: CHARENTON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: ESSILOR INTERNATIONAL 147 RUE DE PARIS
City of Mailing Address:: CHARENTON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94227

Correspondence Information

Correspondence Customer Number:: 00466

Representative Information

Representative Customer Number::	00466
----------------------------------	-------

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/002970	11/22/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	04 00110	1/8/04	Yes

Assignment Information

Assignee Name:: ESSILOR INTERNATIONAL
(COMPAGNIE GÉNÉRALE DE OPTIQUE)
Street of Mailing 147 RUE DE PARIS
Address::
City of Mailing Address:: CHARENTON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94227